

Title: Reducing Perinatal HIV Transmission – The Use of Action Learning Labs to Stimulate Systems Level Changes

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Topical Issues of Focus: Successful collaboration between programs to prevent perinatal HIV

Background/Objectives

Despite advances, the CDC estimates that 280–370 infants are born with HIV infection each year¹. In order to prevent perinatal HIV, the Institute of Medicine (IOM) recommends a comprehensive public health infrastructure that includes education, guidelines, performance measures, coordination of care, access to testing, interventions, and increased use of prenatal care².

Action Learning Lab Model Objectives

The Action Learning Lab (ALL) concept was created with the IOM recommendations in mind. The core purpose of the ALL is to promote collaboration among the diverse agencies and programs at the state level to address an issue or outcome that is relevant to each state.

Methods

The Association of Maternal and Child Health Programs (AMCHP) in collaboration with American College of Obstetricians and Gynecologists (ACOG) planned and conducted Perinatal HIV ALL with teams from the District of Columbia, Florida, Illinois, Nevada, New York, North Carolina, Texas, Utah and Virginia—providing a unique opportunity to improve their capacity to respond to the health needs of women by identifying barriers and opportunities for impacting change at the system's level.

The ALL teams met twice, over the course of two days, throughout the year. Perinatal IV ALL teams had an opportunity to:

- Dialogue and come to a common understanding of perinatal HIV transmission;
- Identify state assets to build upon;
- Identify state gaps to be filled;
- Using surveillance data, build consensus on the priorities to be addressed;
- Develop measurable action steps to make system improvements;
- Establish timelines and deliverables to address their priorities; and
- Shop for existing tools, resources and approaches.

¹ Lindegren ML, Byers RH, Thomas P, et al. Trends in perinatal transmission of HIV/AIDS in the United States. JAMA 1999; 282:531–8.

² Institute of Medicine. Reducing the Odds: Preventing Perinatal Transmission of HIV in the United States. National Academy Press. 1999. p.15.

The ALL included presentations from public health experts, state-to-state discussions and interactive workshops. State teams were guided through activities to identify the barriers and challenges in addressing perinatal HIV and to establish an Action Plan. AMCHP provided technical assistance to ALL teams throughout the year and facilitated at least one topic-specific conference call with the agenda determined by the ALL team.

Assessing the Success

Each ALL team documented:

- Evidence of short-term systems changes.
- Cross-team learning opportunities, including sharing promising approaches, resources, tools, information and ideas.
- Evidence of increased collaboration and interaction between team members subsequent to ALL.
- Measurable improvements to state public health systems.

Results

Using the previously mentioned criteria for assessing success, the perinatal HIV Action Learning Labs teams from Florida, North Carolina and Texas attained major achievements as a result of the ALL model.

Florida

The Florida ALL team chose to work with strategic partners to increase knowledge among providers and clients regarding the availability of resources as they relate to HIV/AIDS prevention – specifically for pregnant women. The Florida ALL team met its goal through the creation of:

- Stronger links and the creation of systems among agencies to facilitate effective client referrals and the sharing of information to track clients including the creation of a standardized *Client Consent to the Release of Information* form to facilitate client interagency referrals.
- A pilot collaborative project with the Women, Infants and Children (WIC) Program office to establish an HIV test site.
- Brochures for pregnant women and doctors of pregnant women to explain the importance of HIV counseling and testing.
- Photo novellas in Spanish and Creole, targeting Hispanic and Haitian women respectively. The novellas encourage immigrant pregnant women to access prenatal care without fear of deportation, and they emphasize the importance of perinatal care during pregnancy.

North Carolina

The North Carolina ALL team established the goal of implementing a “Best Practice Model” around counseling and testing of women of childbearing age. The North Carolina ALL team met its goals through the creation of:

- The “Providers Partnership Project”—a collaborative effort between the North Carolina Department of Health and Human Services Division of Public Health and the North Carolina Section of the American College of Obstetricians and Gynecologists to focus on perinatal HIV. This small group of public and private sector representatives worked together to develop strategies to increase the counseling and testing rates of all pregnant women in North Carolina.

Texas

The Texas ALL team concentrated on achieving the two major goals of conducting a public awareness campaign on prenatal care and developing a referral and consultation network of qualified providers. The Texas ALL team achieved its goals through the following activities:

- Drafting a booklet designed for African-American women of childbearing age with HIV infection or at risk for HIV infection to educate and increase issue awareness of perinatal HIV transmission.
- Bringing together participants from Maternal/Child Health, HIV/STD, public health regional partners from the geographical areas where the rates of HIV perinatal transmission are the highest, as well as medical experts in obstetrical care and HIV perinatal transmissions from private and public hospitals.
- Contributing to provider understanding and training on the subject of perinatal HIV prevention by creating a survey and conducting focus groups to address the issue. The survey results included recommendation regarding access to obstetrical care for women at risk for and/or infected with HIV and were forwarded to regional HIV planning groups.

Conclusions

Use of the perinatal HIV Action Learning Lab model proved to be successful at increasing collaboration among multiple agencies and stimulating systems level changes. AMCHP encountered no problems in the planning or implementation of the ALL. Based on the results to date, only minor programmatic modifications are needed.

Sustaining the efforts of collaborative groups such as the ALL teams, however, has inherent problems and requires the careful analysis of management practices, financial sustainability and the ability to ensure program continuity of each of the collaborative groups.